## **Marion County Radio Amateur Civil Emergency Service** R.A.C.E.S. Membership Application (Please Print)

| Tame: Call Sign:  |                                      |          |            |     |       |                    |           |    |   |   |     |     |  |
|---|--------------------------------------|----------|------------|-----|-------|--------------------|-----------|----|---|---|-----|-----|--|
| Last Name, Suf  | fix, First N                         | lame, Mi | iddle Init | ial |       |                    |           |    |   |   |     |     |  |
| Address: Date of Birth:   |                                      |          |            |     |       |                    |           |    |   |   |     |     |  |
|   |                                      |          |            |     |       | Must be 14 yrs old |           |    |   |   |     |     |  |
| City:   |                                      |          | State:     |     | Zip:  |                    | County    |    |   |   |     |     |  |
| In case of emergency  | In case of emergency contact – Name: |          |            |     |       |                    |           |    |   |   |     |     |  |
| Address:  |                                      |          |            |     |       |                    |           |    |   |   |     |     |  |
| City:   |                                      |          | State:     |     | Zip:  |                    | Phone: () |    |   |   |     |     |  |
| Email Address:@   |                                      |          |            |     |       |                    |           |    |   |   |     |     |  |
|   |                                      |          |            |     |       |                    |           |    |   |   |     |     |  |
| Mode / Meter  | 160                                  | 80       | 40         | 30  | 20    | 15                 | 12        | 10 | 6 | 2 | 220 | 440 |  |
| CW  |                                      |          |            |     |       |                    |           |    |   |   |     |     |  |
| AM/SSB  |                                      |          |            |     |       |                    |           |    |   |   |     |     |  |
| FM  |                                      |          |            |     |       |                    |           |    |   |   |     |     |  |
| SSTV  |                                      |          |            |     |       |                    |           |    |   |   |     |     |  |
| PSK 31  |                                      |          |            |     |       |                    |           |    |   |   |     |     |  |
| OLIVIA  |                                      |          |            |     |       |                    |           |    |   |   |     |     |  |
| PACKET  |                                      |          |            |     |       |                    |           |    |   |   |     |     |  |
| APRS  |                                      |          |            |     |       |                    |           |    |   |   |     |     |  |
| ECHO-LINK   |                                      |          |            |     |       |                    |           |    |   |   |     |     |  |
| D-STAR  |                                      |          |            |     |       |                    |           |    |   |   |     |     |  |
| MOBILE OPNS   |                                      |          |            |     |       |                    |           |    |   |   |     |     |  |
| Can your home station operate without commercial power? License Class:  Specialized Training (PSTI Courses, SKYWARN, Red Cross, etc.) |                                      |          |            |     |       |                    |           |    |   |   |     |     |  |
| NIMS Course Completions (minimum requirements):  ICS-100  |                                      |          |            |     |       |                    |           |    |   |   |     |     |  |
| Applicant Signature:  |                                      |          |            |     | Date: |                    |           |    |   |   |     |     |  |
| Security Check completed by: Oath given by:  Approved Denied Signature:   |                                      |          |            |     |       |                    |           |    |   |   |     |     |  |
| Date EMA Identificat  |                                      |          |            |     |       |                    |           |    |   |   |     |     |  |
| Accepted and authorized by: Date:   |                                      |          |            |     |       |                    |           |    |   |   |     |     |  |

County EMA Director or Designated Official

## Marion County Radio Amateur Civil Emergency Service R.A.C.E.S. Membership Application

(Please Print)

Marion County RACES operates under the authority of the City of Indianapolis, Division of Homeland Security, Department of Public Safety. The goal of RACES is to provide adjunct communications services to the MCIDHS in the event of a significant emergency in Marion County.

## **REQUIREMENTS FOR MEMBERSHIP**

- ✓ Must possess a valid FCC issued Amateur Radio License (any class)
  - o A copy of which must be submitted with the application
- ✓ Must be at least 14 years old
- ✓ Must complete four (4) of the National Incident Management Systems (NIMS) Courses
  - o ICS-100: Introduction to ICS
  - o ICS-200: ICS for Single Resources and Initial Action Incidents
  - o ICS-700: Introduction to the National Incident Management System (NIMS)
  - o ICS-800: Introduction to National Response Framework (NRF)
  - o Copies of which must be submitted with the application
  - O All can be found at no cost at: <a href="http://www.training.fema.gov">http://www.training.fema.gov</a>
- ✓ Must possess own personal transportation or have access to other transportation means